DECLARATION AND POWER OF ATTORNEY

ATTORNEY DOCKET NO. 200300049-1

FOR PATENT APPLICATION

As a below named inventor, I hereby declare that:

My residence/post office address and citizenship are as stated below next to my name;

joint inventor (if plural patent is sought on the	names are listed below) invention entitled:	of the subject matter w	d below) or an original, first and hich is claimed and for which a	
APPARATUS AND METI	HOD FOR MOUNTING A	DEVICE TO A RACK SYS	TEM	
the specification of whi	ch is attached hereto unle	ess the following box is o	checked:	
() was filed on	as US /	Application No. or PCT In	nternational Application	
Number	and was ar	mended on	(if applicable).	
including the claims, as	amended by any ameno which is material to pater	dment(s) referred to abo	e above-identified specification, ve. I acknowledge the duty to CFR 1.56.	
I hereby claim foreign priority	benefits under Title 35, Unite	ed States Code Section 119 of	any foreign application(s) for patent or	
inventor(s) certificate listed be	elow and have also identified b application on which priority i	elow any foreign application for	or patent or inventor(s) certificate having	
COUNTRY	APPLICATION NUMBER	DATE FILED	PRIORITY CLAIMED UNDER 35 U.S.C. 119	
N/A			YES: 80):	
			Y859: 80:	
Previsional Application			·	
I hereby claim the benefit und below:	der Title 35, United States Cod	de Section 119(e) of any Unite	ed States provisional application(s) listed	
	APPLICATION NUMBER	FILING DATE		
-	00/000,000			
-			············	
insofar as the subject matter manner provided by the first information as defined in Title application and the national or	of each of the claims of this a paragraph of Title 35, United 5 37, Code of Federal Regulation PCT international filing date of	pplication is not disclosed in the States Code Section 112, I aclus, Section 1.56(a) which occur this application:	I States application(s) listed below and, he prior United States application in the knowledge the duty to disclose material irred between the filing date of the prior	
APPLICATION NUMBER	FILING DATE	STATUS	(patented/pending/abandoned)	
00/000,000				
POWER OF ATTORNEY: As a named inventor, I herel business in the Patent and Tra Customer N	demark Office connected there	ney(s) and/or agent(s) to pros with: Place Castainer Number Bar Code	secute this application and transact all	
oustomer i		Label here		
Send Correspondence to: HEWLETT-PACKARD COM Intellectual Property Admin		Direct Telepho L.Joy Grieben		
P.O. Box 272400 Fort Collins, Colorado 805	527-2400	(970) 898-38	84	
made on information an with the knowledge the imprisonment, or both.	nd belief are believed to nat willful false stateme	be true; and further the ents and the like so me Fitle 18 of the United St	are true and that all statements at these statements were made ade are punishable by fine or ates Code and that such willful nt issued thereon.	
Full Name of Inventor: Greq	g S. Schmidtke	Citizenship: U	S.A.	
Residence: 4607 Kitchell Way, Fort Collins, CO 80524				
Post Office Address: 4607 Kitchell Way, Fort Collins, CO 80524				
estatus suprama	lande		7-2003	

Rev 05/03 (DecPwr)

(Use Page Two For Additional Inventor(s) ഏരെങ്ങൾ(s))

Page 1 of 2

DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION (continued)

ATTORNEY DOCKET NO. 200300049-1

Full Name of # 2 joint inventor:	Kelly J. Reasoner	Citizenship: U.S.A.
Residence:	2442 Yaxkshire Street, Fort Collins, CO	80526
Post Office Address	2442 Yorkshire Street, Fort Collins, CO	80526
Inventor's Superior		7-24-2003
weeken a sugarant	Date	
5 11 5 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
Full Name of # 3 joint inventor:		Citizenship:
Residence:		
Post Office Address:		
inventor's Signature	Date	
Full Name of # 4 joint inventor:		Citizenship:
Residence:		
Post Office Address:		
Inventor's Signature	Date	
Full Name of # 5 joint inventor:		Citizenship:
Residence:		
Post Office Address:		
inventor's Signature	Date	
Full Name of # 6 joint inventor:		Citizenship:
Residence:		
Post Office Address:		
,		
Inventor's Signature	Date	
Full Name of # 7 joint inventor:		Citizenship:
Residence:		
Post Office Address:		
Inventor's Signature	Date	
Full Name of # 8 joint inventor:		Citizenship:
Residence:		
Post Office Address:		
inventor's Signature	Date	